

**STATE OF CALIFORNIA
DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING
BRAILLE BROCHURE ORDER FORM**

Brochures are sold by quantities below only. Please allow 2 weeks after receipt of your order for delivery. No purchase orders, phone orders, credit card or COD orders will be accepted

Employment Discrimination Based on Disability	
NUMBER OF COPIES:	TOTAL COST (includes shipping)
1	Free
5	\$8.50
10	\$12.50
25	\$22.50
50	\$37.50

**Please complete all (3) steps listed below
before mailing your request.**

- (1.) *Make Checks Payable To:***
Department of Fair Employment & Housing
- (2.) *Mail Request To:***
Department of Fair Employment & Housing
Public Affairs Unit
2014 T Street, Suite 210
Sacramento, CA 95814

(3.) Please print the address you would like your order shipped to below:

Name/Company: _____

Attn: _____

Address: _____

City/State/Zip Code: _____

Area Code/Tel: _____

NOTE: PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE.